

PTO/SB/01 (6-95)

Approved for use through: 10/31/98 OMB 0651-0032 Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Type a plus sign (+) inside this box → 0010/PTO Rev. 6/95 U.S. Department of Commerce H 3876 PCT/US Attorney Docket Patent and Trademark Office Number First Named SCHWARZER, Joerg **DECLARATION FOR** UTILITY OR DESIGN COMPLETE IF KNOWN PATENT APPLICATION Application Number Filing Date **Group Art Unit** Declaration Declaration Submitted after Submitted with Initial Filing Initial Filing **Examiner Name** As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: METHOD FOR PRODUCING PHYTOSTEROLS (Title of the Invention) the specification of which is attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International 02/04/2000 (if applicable). **Application Number** PCT/EP00/00903 and was amended on (MM/DD/YYYY) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. Lacknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56. I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §385(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed. Certified Copy Attached? Prior Foreign Application Foreign Filing Date (MM/DD/YYYY Not Claimed VES NO Number(s) 199 06 551.9 DE 02/13/1999 Additional foreign application numbers are listed on a supplemental priority sheet attached hereto: I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below. Application Number(s) Filing Date (MM/DD/YYYY) Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION

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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. U.S. Parent Application **PCT Parent** Parent Filing Date Parent Patent Number Number (if applicable) Number (MM/DD/YYYY) PCT/EP00/00903 02/04/2000 Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number Firm Name OR List Attorney(s) and/or agent(s) name and registration number below: Registration Registration Name Name Number Number 42,516 Aaron R. Ettelman John E. Drach 32,891 18,980 Steven J. Trzaska 36,296 Henry E. Millson, Jr. Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto. Fill in correspondence Customer Please direct all OR 23657 or label address below correspondence to: Number Name Aaron R. Ettelman Address **Address** State ZIP City 610-278-6548 Telephone 610-278-4930 Fax I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Name of Sole or First Inventor: A petition has been filed for this unsigned Middle Suffix Given Family Schwarzer Joerg e.g. Jr. Initial Name Name Inventor's Date Signature Hilden State Country Germany Citizenship Germany Residence: City Post Office Address Kunibertstrasse 13 Post Office Address City 40723 Hilden State Zip Country Germany Applicant Authority Additional inventors are being named on supplemental sheet(s) attached hereto

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DECLARATION							ADDITIONAL INVENTOR(S) Supplemental Sheet					
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor												
Given Bernhard Name		Mid Initi		Family Name Gutsche		Gutsche			Suffix e.g. Jr.			
Inventor's Signature									Date			
Residence: Hilden City			St	ate	Co	untry	Germany		Citizenship	Germ	any	
Post Office Address Kalstert 96												
Post Office Address												
City 40	724 Hilden		State		Zip	Co	untry	Germany		Applicant Authority		
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor												
Given Name				Mid Initi		Fam Nam					Suffix e.g. Jr.	
Inventor's Signature									Date			
Residence: City			•	St	ate	Co	untry			Citizenship		
Post Office Address												
Post Office Address												
City			State		Zip	Co	untry			Applicant Authority		
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor												
Given Name				Mid Initi		Fam Nam					Suffix e.g. Jr.	
Inventor's Signature									Date			
Residence: City				St	ate	Co	untry			Citizenship		
Residence:	Address			St	ate	Co	untry			Citizenship		
Residence: City				St	ate	Co	untry				<u> </u>	
Residence: City Post Office			State	St	Zip		untry			Citizenship Applicant Authority		
Residence: City Post Office	Address	al Joint Invent				Co	untry	has been fil	:	Applicant Authority	ned inv	ventor
Residence: City Post Office	Address	al Joint Invent			Zip	Co	untry	has been fil	:	Applicant Authority this unsig	ned inv Suffix e.g. Jr.	ventor
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Residence: City Post Office Post Office City Name of A Given Name Inventor's	Address	al Joint Invent		y: Mid Initi	Zip	Co A pet	untry	has been fil	ed for	Applicant Authority this unsig	Suffix	ventor
Residence: City Post Office Post Office City Name of Given Name Inventor's Signature Residence:	Address	al Joint Invent		y: Mid Initi	Zip dle al	Co A pet	untry ition I	has been fil	ed for	Applicant Authority this unsig	Suffix	ventor
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Residence: City Post Office Post Office City Name of Given Name Inventor's Signature Residence: City Post Office	Address Additiona Address	al Joint Invent		y: Mid Initi	Zip dle al	Co A pet Fam Nam	untry ition I	has been fil	ed for	Applicant Authority this unsig	Suffix	ventor